Ontario
Advisory Council
on Senior Citizens

A Report on Health Promotion

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RESPONSE

TO THE QUESTION RAISED

BY

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AFFAIRS

"HOW CAN SENIORS BE ENCOURAGED

TO TAKE PREVENTIVE MEASURES

AND ASSUME A HEALTHY LIFESTYLE?"

ONTARIO ADVISORY COUNCIL ON
SENIOR CITIZENS

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THERE ARE APPROXIMATELY 860,000 senior citizens living in Ontario. Many of them, we know, are what have been referred to as "H.A.V's", that is they are healthy, active and vigorous. Unfortunately, others are definitely "H.A.V.N.O.T's" with life styles that are unhealthy, inactive and lacking vigor.

Population projections indicate that by 1991, of 9,471,000 Ontario residents, 1,189,200 (12.6%) will be men and women 65 years of age or older. Of that number some 245,300, or 20.6%, will be 80 or older; and by 2001 those over 80 years of age will represent almost 24% of the 65 and older group. We know that the incidence of ill health increases with age, which creates serious concerns about future health care costs. The Ontario Advisory Council on Senior Citizens believes these concerns should focus the attention of everyone, from Senior Government to individual citizens, on the need to consider ways and means of preventing illness and staying healthy.(1)

Will Durant, in his book What is Civilization, said "The health of nations is more important than the wealth of nations." The state of health of Ontario residents, and in particular those 65 years of age and

older, is having a tremendous impact on the wealth of the province. Current estimated health care costs for Ontario's seniors amount to approximately $3.39 billion. However it is doubtful whether even 2% of that amount is being spent on health promotion.

The End of an Era

In many ways, today's seniors can be said to represent the end of an era. Education and technology have changed dramatically over the past twenty years and those approaching retirement today are, to a large extent, better educated. Their communication skills are sharper and, as one result, their ability to access and interpret information is improving and changing. Children of the twenties, they grew up during the World War II years, but did not directly experience the effect of the great depression on their own working life.

Pension, employee benefit and social insurance plans mean today's retirees have some financial stability. They have also grown up in a society with access to health care and information about nutrition and health related issues. Certainly, more women have been in the

work force and, as their participation increases, so they bring a different perspective to society's view of retirees and retirement. IF THE COSTS OF HEALTH CARE IN THE PROVINCE ARE TO BE STABILIZED, SOMETHING HAS TO HAPPEN TO PERSUADE PEOPLE TO USE EXISTING INFORMATION AND RESOURCES AND ADOPT A LIFESTYLE, LONG BEFORE THEY REACH 65, WHICH WILL PREVENT THE HIGH HEALTH COSTS OF ONTARIO FROM DESTROYING ITS WEALTH. The process of persuasion is usually referred to as Health Promotion.

Definition

Health promotion means different things to different people. The World Health Organization has said:

> "Health promotion represents a mediating strategy between people and their environments, synthesizing personal choice and social responsibility in health to create a healthier future."(2)

In this definition, health promotion is seen as a process whereby people are enabled to improve and increase control over their own health. It is focused on everyone, not just those at risk because of specific illness. Health professionals are seen as having a valuable role to play in encouraging this process.

The Health Promotion Directorate of Health and Welfare Canada sees health promotion involving "... the promotion of personal habits consistent with wellness or good health so that unnecessary health risks can be avoided."(3)

The Ontario Advisory Council on Senior Citizens has always promoted the view that seniors should be encouraged to accept responsibility for themselves to the fullest extent possible. This includes accepting responsibility for a lifestyle affecting one's own health; and one should not wait until retirement to start thinking this way! W.B. Dalziel, writing in Meridian, the magazine for Ottawa - Carleton Seniors, put it very well when he said:

> "the best news about aging is that we do have a choice about how we age. The bad news is that the answers do not come in an easy to take pill form. The answers involve personal choices concerning activity, diet, alcohol, attitudes, tobacco, exercise and many more. Use it or lose it." (4)

Council endorses all of the foregoing interpretations of health promotion but feels strongly that while agreeing seniors can benefit from special programs, implementation strategies should:

(a) be directed at the entire population;
(b) should begin well before retirement; and
(c) should be designed to appeal to today's seniors.

What should Health Promotion encompass?

Council members feel health promotion should encompass the following:

- Education demonstrating ways and means of illness prevention. This would include information about foot, skin, dental, hearing and vision care, suicide prevention and mental health.

- Nutrition.

- Exercise and activities.

- Wise use of medications, and alcohol.

- Encouragement to become socially active as volunteers, and participate in one's community.

All of the above issues need to be addressed from the position that good health is a normal goal for everyone, and we all have a responsibility to avoid ill health; that individual well-being is a valid objective in the eyes of society. This represents a major change in society's attitude which, in turn, can only result from an improved approach to health education, beginning at the elementary school level.

To a large extent the current "medical model" in health promotion works against this objective. Physicians and other health professionals are trained to cure illness. This presents great problems for many of them in working with seniors, for whose illnesses cure is not always possible but who often require instead health management counselling. Well-being clinics exist, but are not readily available across the Province. Clinicians do not have the option to specialize in this aspect of medicine, and the fee structure to recompense those that wish to use such an approach to medicine would have to be restructured completely. However, the cost implications of such changes could well be offset by the long-term gains to society in funding

well-being.

There is a hidden reward for many who become ill; they receive attention and care. For many lonely seniors this is the only time anyone does focus on them and all too easily the attention becomes a "reward" for ill health. Well-being clinics, however, can provide equal attention to an individual's needs and provide the encouragement and support to avoid illness.

The recent Counter Measures campaign of the Ministry of the Attorney General has been very successful in persuading people that it is no longer socially acceptable to drink and then drive a vehicle. Similarly, cigarette smoking is rapidly becoming unacceptable: The imposition of stiffer sentences for breaking the law is certainly a powerful deterrent. However, in the same way that one is "rewarded" by a reduced insurance premium for accident-free driving, or the fact one is a non-smoker reduces one's life insurance premium, A WAY HAS TO BE FOUND TO REWARD PEOPLE WHO ADOPT A HEALTHY LIFESTYLE AND REDUCE THEIR RISK OF ILLNESS.

How can seniors be encouraged to adopt a healthy lifestyle?

The greatest need in health promotion is Good

Marketing; the old "snake oil" approach! The most difficult part is to find the trigger that makes people fire up enthusiasm for the idea of staying healthy. The consequences for the action they are being asked to take need to be visible and, preferably, measurable and meaningful in a social sense. If that means the use of gimmicks to catch attention, then that should be accepted.

A survey of the media habits, preferences and needs of senior citizens in Metro Toronto, carried out for the United Church of Canada in 1973 and published by Information Canada, concluded that the majority of seniors feel they enjoy reasonable health. (5) The difficulty is to persuade them it could be better and it is within their power, and to the advantage of society as a whole, to see that it is better.

The same study revealed that health was seen as "the only major impediment to an unbridled use of free time."(6) This may prove to be the trigger for most seniors. THE PERSONAL CHOICE OF A HEALTHY LIFESTYLE IS THE WAY TO ACTIVE INDEPENDENCE IN SOCIETY.

Access to Information

Information about illness prevention and control, and

other health promotion issues needs to be made readily available to everyone, but particularly those approaching retirement. For the pre-retirement group the active co-operation of employers is invaluable, particularly with respect to pre-retirement counselling. Experience shows health counselling in general and nutrition specifically, and is mostly rejected at the present time. One technique for this group may be to address the subject of well-being of seniors or aged persons in their own families. With the increasing incidence of 50 and 60-year-old children looking after 80 and 90-year-old parents, there is considerable interest in alternative lifestyles within many families, as they witness the loss of independence associated with ill-health for the older members of the family.

The promotion of mental well-being is a particularly sensitive area for seniors. Changes in lifestyle that are associated with retirement, and the loss of prestige associated with paid employment, can easily lead to feelings of inadequacy, lack of self-worth and depression. Ageing naturally increases certain risk factors, such as the likelihood of bereavement, and the incidence of suicide among elderly people is of concern to many. However, examples of positive, creative retirement lifestyles are all around us; they need to be presented as healthy and rewarding.

Health promotion information needs to be made available where seniors are located. For example, in Elderly Persons Centres, shopping malls, seniors clubs, retirement homes and communities, etc., and the message needs to be repeated and repeated. The most difficult to reach, yet the most needy seniors, are those who stay home and, for whatever reason, do not participate in social activities. The media, including Especially For Seniors, the quarterly publication of Council, has a valuable role to play here, but more particularly radio and television is very important. By using the Neilsen and similar survey-based ratings, the private sector should be encouraged to promote health issues for seniors using personalities to whom seniors listen and with whom they can identify. The advertising industry also needs to be kept constantly aware of the dangers of "ageism" in advertising.

Techniques

One technique in health promotion is to focus a campaign on a very specific target, using pre-determined measurement techniques; for example, environmental accident prevention in the 65 to 75 and 75 to 85 age groups. A campaign warning of the damage to health caused by accidents in the home could be mounted, using media inserts in government mailings to all Old Age Pensioners. Hospitals would be asked to

monitor admission rates, or Emergency Department visits, attributed to home accidents over a set time, comparable to a similar period prior to the campaign. Drug misuse might be the focus of a similar campaign.

Another approach would be to develop promotional materials extolling the virtues of environmental safety but not focussing specifically on accident prevention. In a similar manner, people are encouraged to attend regular check-ups, become active volunteers, etc.

Summary

Health promotion techniques that we know do not work for seniors include:

- use of small print materials
- a dry, didactic, or pedantic approach to nutrition
- information materials that must be paid for
- information that isn't readily accessible
- information that isn't relevant to seniors
- information that seniors cannot "personalize"
- Madison Avenue advertising jargon

Things that do work are:

- positive images of aging
- larger clear print information
- humour
- information that provides choices or options for seniors
- free promotions, particularly nutritional
- promotions that offer some opportunity for socializing
- information delivered to the senior at home
- information that has practical applications and is relevant to a senior's way of life.
- material that uses seniors as models

Things to be avoided:

- encouragement of "faddism" in matters of nutrition & health promotion
- exploitation of seniors by manufacturers and sales people using "health" as a promotional tool

The majority of seniors are active and involved citizens, increasingly well-educated, able to travel

and live independent lifestyles. Most senicrs prefer to remain in their own homes for as long as possible and in order to do this have a vested interest in remaining as healthy as possible for as long as possible.

The following recommendations are put forward as ways of encouraging Ontario's seniors, and those approaching retirement, to achieve the objective set out by the World Health Organization of "synthesizing personal choice and social responsibility in health to create a healthier future" for themselves in particular, and Ontario as a whole.

RECOMMENDATIONS

Pre-Retirement

- One should not wait until retirement to adopt a healthy lifestyle; pre-retirement counselling on well-being is crucial and should start at 40 to 45, not 64.

- Governments Industry, unions, and staff associations should be encouraged to sponsor retirement counselling programs for employees long before employees approach retirement age.

- Many people approaching retirement are also looking after their parents; they are very receptive to health-related information for older seniors.

- Attendance at the nutrition program included in pre-retirement counselling is generally very poor, compared to attendance at financial planning programs. The presentation of information about nutrition needs to be redesigned to recognize that eating practices are changing.

- Health promotion in the workplace environment is very valuable and should be encouraged by all levels of government and unions.

- Employee organized exercise groups often need the support of the employers to locate suitable exercise space. This support could be made tax deductible to encourage employers to provide such space.

- Rural families have equal needs for access to pre-retirement counselling. Long working hours often mean they cannot attend Counselling sessions. Special initiatives to direct information to such families should be undertaken.

- Farming associations and community groups should be encouraged to initiate small, locally run counselling sessions, using professional health care staff, lawyers, bankers, recreationists and people from the community and Government offices to provide information and support. The manual Retirement Planning for Small Communities in Ontario issued by the Ministry of Tourism and Recreation provides excellent resource information in this respect.

- Information about recreational activities after retirement is needed by farm families. Retirement for a farmer often means moving from the farm into a town, and the end of a very physically active career. The lack of exercise, and feelings of uselessness that are associated with reduced activities, may create serious problems and may lead to a higher mortality rate.

Nutrition

- Food is a very positive reward for many people, socially as well as psychologically. Seniors enjoy socializing over a meal and such occasions can be used to promote good nutrition in a festive spirit.

- Increasing the numbers and availability of registered dieticians would be particularly helpful to seniors, many of whom require practical dietary and nutritional counselling that physicians are often unable to provide.

- The services of qualified and registered dieticians should be available to seniors as a benefit under OHIP.

- Registered dieticians would be valuable resource personnel for well-being clinics.

- The style in which information about nutrition is presented is crucial. Everyone eats, usually foods they enjoy. To approach the subject in a didactic manner, inferring people are unhealthy because they don't eat whatever product or ingredient is being seen as particularly desirable at any given time, is very unproductive.

- Since many seniors have successfully raised families, it could be assumed they are reasonably knowledgeable about food preparation; however, ways of adapting their customary recipes to smaller quantities would be very useful.

- Recognizing the changing image of the "average" senior means acknowledging some seniors have microwave ovens, often gifts from their families. Promotions that show how to adapt cooking habits to enable people to use an energy efficient way of preparing small portions, which retain a high nutrient level, would be helpful.

- Efforts could be directed toward heightening the interest of men in cooking. Industry promotions, incorporating good nutrition, should be encouraged to direct attention to men.

- One way of sparking interest in nutrition would be to link various produce marketing boards, i.e. poultry, egg, milk, etc., with senior groups. The Board could provide the product and the seniors do the preparation. This would be a way to promote good nutrition in a social setting.

- Marketing Boards should be encouraged to make available visual aids promoting wise use of their products for pre-retirement counselling sessions and seniors clubs.

. Positive approaches to the advantages of good eating habits can be personalized by the approach "what's in it for me", as in

- eat well, stay young
- eat well for energy, etc.

. Cooking demonstrations - by seniors and for seniors can be very successful, particularly if there are small give-aways involved. Such projects can be undertaken very informally by seniors groups and organizations.

. The cost effectiveness for food processors in preparing small portions of food, thus allowing a greater variety in menu will increase as the number of seniors increases. One of the most constant complaints of seniors is the limited availability of small portion packages.

. The print on packaged food products should be as large as possible, for ease in identification of contents.

. Seniors could benefit from easily accessible advice on ways and means of food preservation.

- The Canadian Diabetic Association makes available very colourful information materials about nutrition, which are easy to read and attractive in presentation. Seniors should be encouraged to take advantage of such existing materials.

- Advertising agencies and food editors could be encouraged to provide lively information on nutrition for seniors in public service spots.

- Interesting short films on health & nutrition, appropriate for seniors are available in the Toronto public library system. These, however, are poorly advertised at present. Information regarding their availability should be distributed widely to smaller communities and all Senior Centres.

- Crosswords, wordgames and puzzles are of interest to many seniors and could be used in health promotion.

- There are many regional and ethnic aspects to food preparation and all promotional activities regarding nutrition should consider these important and essential factors.

Medicine and Medications

- The inclusion in mailings of the Drug Benefit card of a leaflet suggesting questions seniors could ask about the use of medications, and printed in larger typesize, has been issued by the Ministry of Health on the recommendation of Council. Similar cards could be mailed out with information about vision or dental care.

- Locally-based health care professionals should be encouraged to hold public information sessions about medications on a regular basis, with seniors and others in the community being encouraged to bring their medications along for review.

- Public health, Sr. Elizabeth and V.O.N. staff providing home care services should be encouraged to discuss the use of medications with both patients and caregivers.

- Seniors should be enabled to have regular dental check-ups. Ill-fitting dentures affect the choice of food and can lead to under nourishment.

- The Ministry of Health should be asked to

undertake a study of existing well-being clinics to measure the extent to which their clients are satisfied with the services received.

. Teaching institutions, as part of the thrust to increase course content in gerontology, should be instituting courses in well-being counselling.

General Health Promotion

. The promotion of well-being should be an integral part of all policy considerations and program design by all levels of government.

. To the greatest extent possible, the promotion of well-being and good health practices should be carried out through existing structures and programs.

. The promotion of good health and training in all aspects of achieving well-being starts in the elementary school system. The Ministry of Education and School Boards should be encouraged to renew and update health programs every year to ensure courses are relevant and are presented appropriately.

. Appropriate information about the prevention of

osteoporosis should be distributed as widely as possible in Ontario Secondary schools.

- The provision of licensed and supervised health care and well-being clinics could be achieved by the use of mobile teams of professionals and appropriately trained paramedical staff, visiting Elderly Persons Centres, Senior Centres or Community Centres on a regular basis.

- Community groups could be encouraged to hold events promoting illness prevention, or well-being. These might include senior "spa" days at local Y.M. or Y.W.C.A. facilities, Municipal recreation facilities or senior clubs, with an all day program that includes footcare, haircare, a "healthy" lunch, and exercise program and other fun activities that would have local appeal. The chiropodist and hairdresser would be paid by their clients and the day would have a social value as part of health promotion.

- Volunteerism should be promoted as a useful and mentally healthy activity, providing stimulation, socialization and enjoyment.

- Dancing is a popular exercise for many seniors and as a social activity, is inexpensive to organize.

- Volunteers could be enlisted in a community to visit home-bound seniors to help with small jobs needed specifically to maintain the house and garden in a safe state and prevent accidents.

- Everyone needs to be encouraged to extend their knowledge of their own health, to become aware of ways of protecting their health using existing resources in the community. Many communities need a health promotion advocate to persuade the residents to utilize existing resources. Good health means a less costly health care system in the final analysis. A healthy lifestyle is therefore to the advantage of society in general. THE FOCUS OF A GOOD HEALTH PROMOTION CAMPAIGN SHOULD BE BASED ON THE CONCEPT OF ACCEPTING RESPONSIBILITY FOR ONE'S OWN WELL BEING, AND THUS RETAINING INDEPENDENCE.

Health Promotion does not need to be expensive; it does need to be positive and imaginative. Preventive measures such as:

- regular checkups with the doctor for persons of all ages;

- regular checkups with the dentist, (particularly prior to retirement, when some people are insured in dental plans);

- discrimination and good sense in the use of prescribed or over-the-counter medications;

- physical activity appropriate to one's age and physical limitations;

- intellectual and volunteer activity to stimulate and enhance one's life;

- good vision care with regular checks;

- creating a safe living environment to minimize falls and accidents;

are within the scope of everyone. A healthy lifestyle is a happier lifestyle. Society as a whole must accept responsibility for making it desirable.

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